

OFFICE OF ADMINISTRATIVE HEARINGS  
STATE OF CALIFORNIA

**JOINT REQUEST FOR CONTINUANCE OF SPECIAL EDUCATION MEDIATION**

Upon receipt of a request for due process hearing and/or mediation, the Office of Administrative Hearings issues a scheduling order which identifies a mediation date, one hearing date, and the decision due date. These dates are set to insure compliance with the federally mandated timelines.

Mediation is a voluntary process. This form is intended to assist parties who wish to agree to continue the initial mediation date set by the Office of Administrative Hearings.

If you are not in agreement to continuing the mediation date, you may cancel the mediation date. To cancel the mediation date without rescheduling the date, you may simply sign below and return this form to OAH via facsimile at 916-376-6319.

**REQUEST FOR CONTINUANCE OF INITIAL SPECIAL EDUCATION MEDIATION DATE**

The parties may agree to change the mediation date to a date that is no more than 30 calendar days<sup>1</sup> after the initial mediation date identified in the scheduling order. Any request to continue the mediation beyond 30 days must be accompanied by an explanation for the request.

Case Number: \_\_\_\_\_

Student Name: \_\_\_\_\_

Initial Mediation Date: \_\_\_\_\_

Requested Mediation Date: \_\_\_\_\_

**The parties agree to participate in mediation on the date identified above. The mediation date will be recalendared as requested upon receipt of this form. No additional notice of the new mediation date will be sent to the parties Please return the form to OAH at 916-376-6319**

\_\_\_\_\_  
(Signature of Parent/Representative) \_\_\_\_\_ Date

\_\_\_\_\_  
(Signature of District/Agency Representative) \_\_\_\_\_ Date

\_\_\_\_\_  
(Signature of Other Party/Representative) \_\_\_\_\_ Date

**CANCELLATION OF MEDIATION DATE**

I \_\_\_\_\_ wish to cancel the mediation date without rescheduling:  
(Name of Party)

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature

<sup>1</sup> If the requested mediation date is after the date scheduled for hearing, the parties must also jointly request a continuance of the hearing dates (see OAH Form Number SE0807001)